1. Amodiaquin
2. Analgin
3. Calcium B. PAS
4. Chloramphenicol
5. Chloroquine
6. Demethyl Chlorotetracydine
7. Diethylcarbamazine Citrate
8. Frusemide
9. Glyceryl Trinitrate
10. Oxyterracycline
11. Phenobarbitone
12. Phthalyl Sulphathiazone
13. Piperazine.
14. Prednisolone
15. Frimaquin**
16. Pyrodlidine Methyl Tetracycline , 17. Quinine
18. Sulphadimidine
19. Tetracycline
20. Tolbutamide

Sale of black listed drugs in the country

1783. SHRI RAFIQUE ALAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of black listing of 42 drugs prepared by International Organisation. of Consumer Unions on the request of United Nations General Assembly which are either banned or allowed on restricted basis in most of the countries;

(b) whether it is also a fact that hazards dangerous effects of each drug have also been spelt out;

** Omitted vide S. O. No 505(E) dt. 23-6-1981.

(c) what is the number of those drugs that are being marketed in India;

(d) whether it is a fact that alternative drugs to these are available;

(e) if so what are the reasons for allowing the continuity of marketing of these drugs; and

(f) what steps have been taken to pro vide information about the dangerous effects of these medicines, to medical profession and patients who use these medidins?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) The Consumer Interpol, a consumerist agency set up in August 1982 to "Police global trade in dangerous products" has drawn up a "blacklist* of products banned or withdrawn in one or more markets, which includes 25 drugs products covering 41 brands of these drug products.

(b) In the said said list, under the heading "Interpols comments" the characteristic side effects toxic effects of these drugs in vulnerable population as reported in the litrature have been given.

(c) Out of the 25 drugs figuring in the Consumer "blacklist", 12- drugs continue tot be marketed in India.

(d) Although alternative member drugs in the same therapeutic class are available, yet one member is not a substitute for another is they are prescribed by medical experts for definite disease condition.

(e) Government in consultation with experts take a decision for continued marketing of the drug keeping in view the incidence of similar adverse reaction in the country, the prevalence of the disease for which the drug- is prescribed the local needs, and the benefit risk factor.

(I) Some of the, characteristic side effects of the drugs mentioned in the list figure under the heading "side effcts" in the package insert and the promotional literature of different members of these drugs

to provide information to the prescribing doctors. Indian Medical Association is informed from time to time regarding adverse reaction to a drug with a re-quest to educate its members about it.

रोहणी कंपलैक्स नई दिल्ली में केन्द्रीय सरकार स्वास्थ्य सेवा औषधालय

1784. **श्री सोहन लाल धूसिया :** क्या **स्वास्थ्य और परिवार कल्याण** मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या रोहिणी, नई दिल्ली में केन्द्रीय सरकार स्वास्थ्य सेवा औषधालय खोलने के संबंध में कोई प्रस्ताव सरकार के विचाराधीन है ;

(ख) क्या सरकार को निवासियों से इस संबंध में प्रतिवेदन प्राप्त हुआ है ; और

(ग) यदि हां, तो वहां केन्द्रीय सरकार स्वास्थ्य सेवा औषधालय कब तक खोल दिए जाने की संभावना है ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (कुमारी सरोज खापर्डे) : (क) और (ख) जी, नहीं।

(ग) ऊपर (क) और (ख) को देखते हुए यह प्रश्न नहीं उठता ।

Announcements in the aircraft in regional language

1785. SHRI M. VINCENT: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government are aware that at the Madras airport, foreign airlines like MAS, Air Lanka and Singapore Airlines makes announcements in the aircraft in, Tamil besides their national language and Eriglish to greet the passengers an d to ex plain the flight precautions for- the convi-nience of the passengers;

(b) whether Government propose to in troduce this system of making announce-ments in Hindi, English and Tamil in these nation? airlines at the Madras Airport; and

(c) whether Government also propose to make these announcements in the aircraft in the regional language of the respective States at the various airorts in the country besides in Hindi and English? •

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (SHRI JAGDISH TYTLER): (a) to (c)
It is a fact that the three foreign carriers who operate to Madras make Tamil announcement in the aircraft in addition to English.

At present Air India make announcement in aircraft in Tamil, Hindi and English in Bombay|Singapore]Kaulalampore| Bombay Sector.

All inflight announcements in Indian Air-lines flights are first made in Hindi and then in English. However ground an-nouncements, wherever made by Indian Airlines are done in regional language also in addition to Hindi and English.

खजुराहो का बम्बई के साथ हवाई सम्पर्क स्थापित करना

1786. **श्री केशव प्रसाद शुक्ल :** क्या **नागर विमानन** मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या सरकार खजुराहो, मध्य प्रदेश को बम्बई के साथ हवाई सेवा से जोड़ने का विचार रखती है ;

(ख) यदि हां, तो इसके कब तक कार्यान्वित हो जाने की संभावना है ;

(ग) क्या मध्य प्रदेश सरकार द्वारा इस संबंध में कोई पत्र व्यवहार किया गया है ; और

(घ) यदि हां, तो उस पर क्या कारवाई की गई है ?

नागर विमानन मंत्रालय के राज्य मंत्री (श्री जगदीश टाइटलर): (क) इस प्रकार का कोई प्रस्ताव नहीं है ।

(ख) प्रश्न नहीं है ।

(ग) जी, नहीं ।

(घ) प्रश्न नहीं है ।